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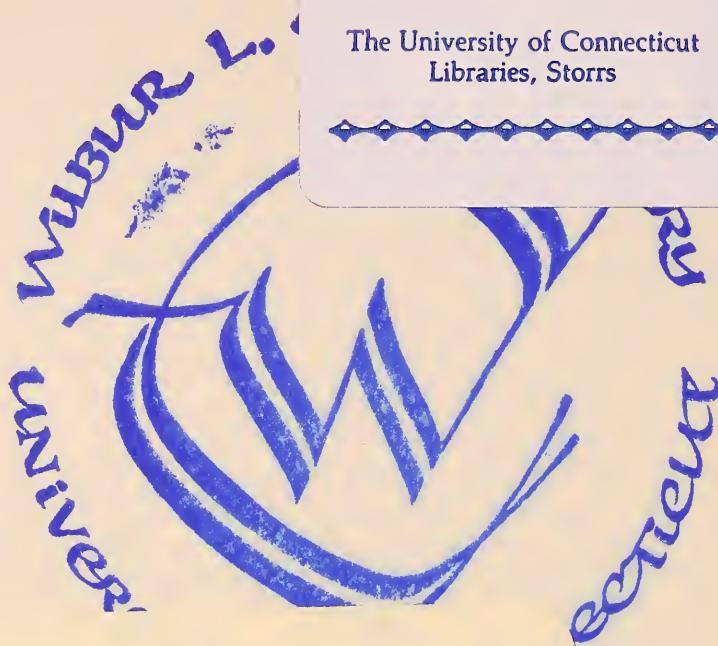
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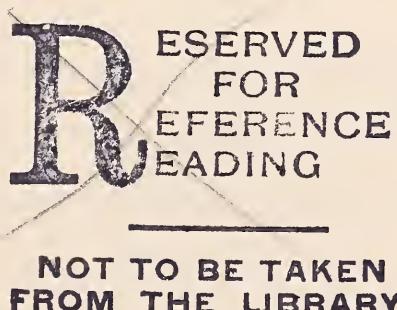
Serial Publications
—
Containing
Medical Classics

An Index to Citations
in Garrison-Morton

Compiled by Lee Ash

With "The Story of the Garrison-Morton
Bibliography of Medical Classics," by Leslie T. Morton

Foreword by Gertrude L. Annan



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TO THE HUMOURS OF MY AFFECTION FOR MEDICAL HISTORY

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The Yale Medical Library

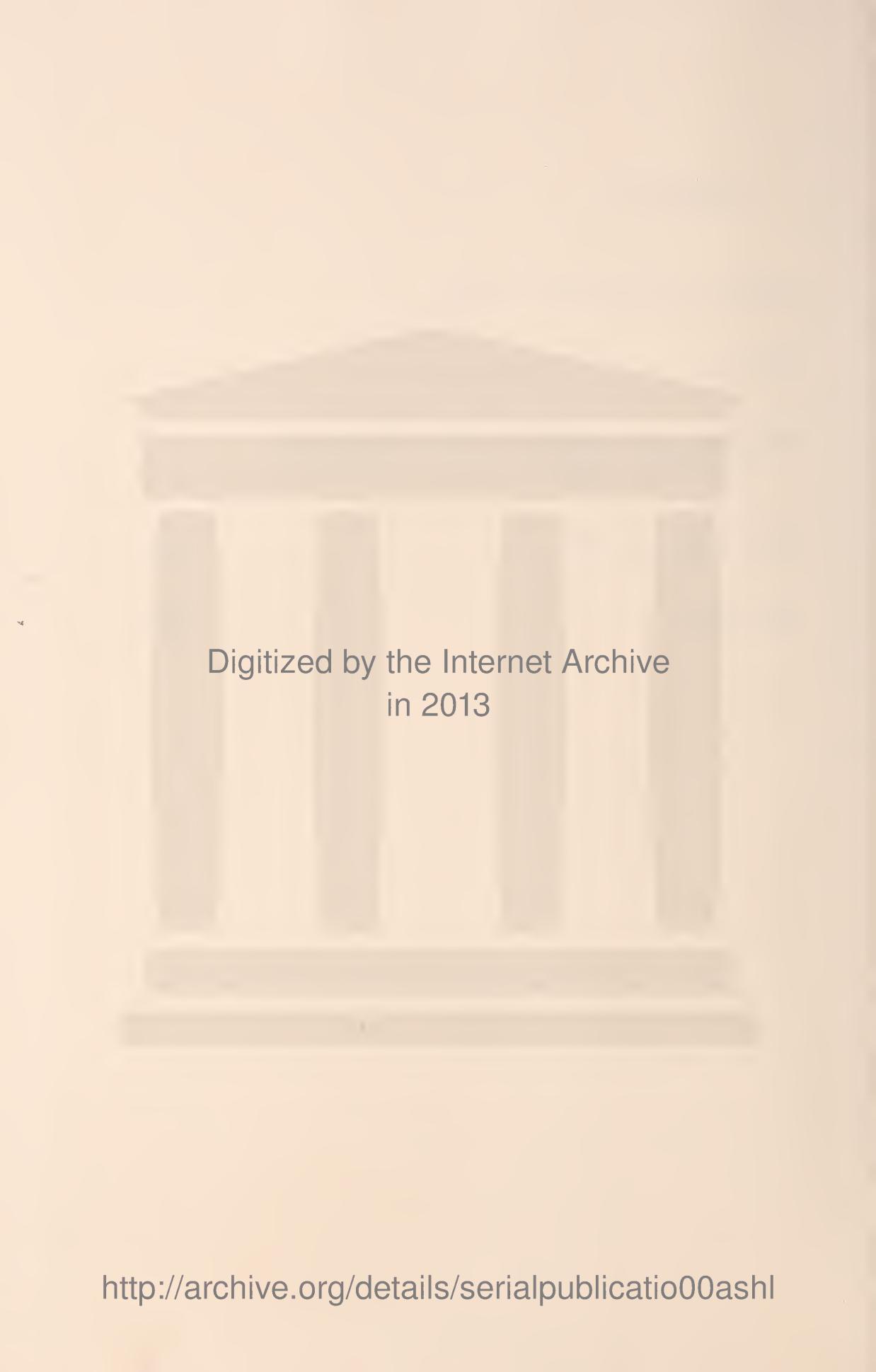
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FOREWORD

"A Garrison-Morton classic!" These are words familiar to medical historians, librarians, collectors, and book dealers. Indeed, the second edition of the Medical Bibliography (surely far more Morton than Garrison) must be within easy reach of all whose work touches upon the history of medicine, for no one volume sees more constant use. Through its author index the important writings of medical men may be quickly found. Through its subject index outstanding contributions are speedily located. Now a third index is based upon its contents, providing a key to the journals containing articles cited therein, a guide to information otherwise unavailable, without considerable and time-consuming research, to all but the expert in the field.

Medical librarians, concerned chiefly with the problems of contemporary medical literature, have little time to devote to acquiring the specialized lore of the literature of the past. Yet often they are called upon to pass judgment upon such volumes, especially those of the last century. The librarian must decide their fate — which to keep; which to throw away; which to offer to another collection.

Even the most experienced librarian flinches at the thought of discarding a rarity, consigning it irrevocably to destruction. Monographs or pamphlets may be checked with comparative ease to avoid the loss of a treasure, but odd volumes of journals with their multiplicity of authors and papers demand expert knowledge for quick decision.

Mr. Ash has provided the necessary key to help us make these decisions. Here in his new Index the uninitiated will discover at a glance that Vol. 27, 1900, of the Zentralblatt fuer Bakteriologie is worthy of keeping because of the article by Landsteiner on blood groups; that the Medico-Chirurgical Transactions of 1877 contain Paget's description of the condition now known as Paget's disease; and that the Journal of the AMA contains many classics, such as Edward Francis' important work on tularemia, described in the 1925 volume. On the other hand, those volumes not listed may be disposed of with some degree of confidence.

For this unusual approach to serial publications librarians will be deeply grateful; antiquarian book dealers most indebted. Collectors cannot fail to find it helpful and historians

will be able to evaluate the importance of individual journals in the development of knowledge. Colonel Garrison would look with favor upon the successors of his modest Texts Illustrating the History of Medicine.

Gertrude L. Annan

Librarian, New York Academy of Medicine
President-elect, Medical Library Association

PREFACE

It is my hope that this Index will serve as a useful tool for librarians, collectors, scholars, and book dealers by enabling them to locate quickly those acknowledged classics of medical history that have appeared in serial publications. Every user will have his own reasons for turning to the Index; but beyond its immediate practical value, my special hope is that it will guide more and more people to the untold wealth of medical history buried in long files of periodicals or in the journals of scientific and learned academies which may be resting upon their shelves unrecognized and unused.

The librarian, even in the smallest medical library, will now be able to find quickly materials for exhibition or lecture purposes; when hard-pressed for space, he will also know which numbers of certain journals he really ought to keep for historical reasons and which ones he can safely discard. For the collector, the Index will provide a handbook to alert him to journals he might want to collect in the antiquarian market as he seeks about the bookstalls of the world. For the scholar, here is a key, a measure as it were, to indicate — in one area, medical history — which journals are fruitful resources for study. And the bookseller, for his part, will be able to evaluate some of his stock better and recognize those serial publications which have some intrinsically desirable subject matter in the field of historic medicine.

Acknowledgments. This Index has been in preparation for nearly a decade, during which time its progress was marked by fits and starts, changes of style, and an enlargement of the original intention and plan — this last suggested by the late Dr. John F. Fulton about two years ago. The final work began in earnest last year. Once again, it is done because of the stimulation and devoted assistance of my wife, Marian Neal Ash, who always sees my projects through to the end with greater determination than I could ever muster by myself. Anyone who is grateful for this guide should direct his thanks to her.

For permission to publish Leslie Morton's Woodward Lecture delivered at Yale, I am indebted to the Yale Medical Library and, of course, to Mr. Morton. The essay is itself a "classic" in the history of medical bibliography in

that it gives a vivid picture of the painstaking perseverance of the biblio-historian in action. It is no wonder that the Medical Library Association last spring awarded Leslie Morton its Marcia C. Noyes Award for "outstanding achievement in medical librarianship." Obviously this guide would not exist were it not for his prior labors. I am indebted, further, to Mr. Morton's publishers, Graftons in London and Argosy Book Stores in New York, for casting a benevolent eye on this enterprise, which depended so heavily on Garrison-Morton, which they published.

Gertrude L. Annan knows how much I appreciate her graceful Foreword. It represents one more generous action in a busy life devoted to the advancement of medical librarianship.

I also want to thank Frederick Kilgour, Yale's Medical Librarian, for his interest and encouragement; and for permitting me to avail myself of the services of Miss Ursula E. Price, Medical Reference Librarian, whose help was invaluable in identifying and correcting many references which I had found perplexing.

Further help was given by my friend Philip Deemer, who cheerfully and, what is more important, accurately typed the very dull original copy; Daniel Wood, of the New York Public Library, gave welcome assistance in proofreading and alphabetizing. And last, chronologically, but certainly not least, I want to make grateful acknowledgment of the help of the Shoe String Press, notably John and Frances Ottmiller, in producing the book.

To all of these friends, I am most grateful. It has been their interest and enthusiasm which have really brought this volume into being.

Lee Ash

New Haven
November 1960

THE STORY OF THE GARRISON-MORTON

BIBLIOGRAPHY OF MEDICAL CLASSICS*

By Leslie T. Morton, Librarian, National Institute for Medical Research, London

I should like to begin this lecture by saying what a great personal sorrow it was for me to have missed seeing Dr. Fulton by only two days.** I had looked forward very much to meeting him again. The librarian, Frederick Kilgour, has asked that this lecture be regarded as a memorial to him, and while I feel it is very inadequate for this purpose, I consider it a privilege to be among the first to be allowed to pay a tribute to the memory of one who had so great a love for the history of medicine.

You will, of course, know that the idea of a list of the outstanding contributions to the literature of the medical sciences emanated from Sir William Osler, who in 1911 advised the then librarian of the Surgeon General's Library, Lt. -Col. Walter McCaw, of the advantage of segregating the more valuable historical items in the Library for safe keeping. With this object in view, Fielding Garrison drew up a suitable list of items and published it in volume 17 of the second series of the Index-Catalogue in 1912. Garrison later used the list as a scaffolding upon which to erect his excellent Introduction to the History of Medicine, the first edition of which appeared in 1914. Some years later he revised it and published it in volume 1 of the Bulletin of the Institute of the History of Medicine, in 1933.

My own interest in medical history began in the late 'twenties, when I worked in the Medical Sciences Library at University College, London. William Sharpey had bequeathed his library to the College, and it contained many treasures, including a Harvey, a Vesalius, Aselli's De Lactibus, and a host of others. At first they had no significance for me, although I listened with interest when my superiors had them out of the safe and expounded on them.

* A Woodward Lecture delivered at Yale University Medical Library on May 31, 1960.

** John Fulton died on May 29, 1960.

It was Professor Charles Singer who really implanted in me an interest in medical history. His room, a few steps from the library, was lined with what may be termed the minor classics of medicine. From time to time he would open his door and beckon to me down the corridor. When I reached his room he would have some treasure open on his desk — perhaps a book he had just bought, or something borrowed from the library of the Royal College of Physicians. He would explain to me why it was of importance or value, and if he had bought it he might tell me how much it had cost.

Although I became very interested in the subject, my knowledge of it grew but slowly. Librarians receive many requests for information that involve searches into history and it is not surprising if they become knowledgeable on this aspect of their subject and acquire an interest in it. My own knowledge grew at first in this way. Medical librarians without medical qualifications cannot expect to keep pace with the growing medical knowledge of their qualified readers, but they can study the history of their subject on terms almost of equality.

I began to browse through the few journals devoted to medical history and to read an occasional book on the subject. I was interested to see the Bulletin of the Institute of the History of Medicine when it first appeared in 1933. Garrison's check-list in revised form appeared in the November issue, but although it struck me at once as a valuable piece of work, I had then no idea of improving upon it.

At this time I was working at the Royal Society of Medicine, and here I was able to see more historical works. Requests for historical information brought my mind back more than once to the check-list but I considered it difficult to consult owing to the lack of an index.

At the end of 1938 I made a more careful examination of the check-list and decided to compile author and subject indexes to it, to facilitate consultation. But unless these were published with the list they would be of use only to a very limited number of people. I discussed the idea with my friend W. J. Bishop and we decided that annotations explaining the significance of the items would add considerably to the value of the list. I next approached Graftons, who specialized in the publication of library manuals and bibliographies. I felt that one of the larger publishing houses would not want to risk money on an unknown author. They agreed to undertake publication of the book.

The next move was to write to Claudio Mayer and Henry Sigerist for permission to publish material which had already appeared in the Index-Catalogue and the Bulletin. Both were kind enough to give their consent and subsequently took

a keen interest in the project. I had no copy of the check-list at this time, as I had moved to St. Thomas's Hospital Medical School, which did not take the Bulletin. So I borrowed a copy from the librarian of St. Bartholomew's and copied out all the entries on slips.

I felt that the arrangement of the list was not ideal and decided to rearrange the main subjects to follow the scheme of the Universal Decimal Classification. I felt, too, that some items could profitably be discarded or replaced. Apart from this, I must confess that I had no set plan of action, feeling that I would enjoy the task more if I tackled the subjects when I felt like dealing with them or when a useful history came to hand. One laborious job was to check each name with the Index-Catalogue and add dates of birth and death where necessary. (At a later stage, finding the dates of persons I had added or who were contemporary proved one of the most time-consuming parts of the task.) I also had to employ this time-consuming method to find names of publishers, but resisted the suggestion that I should include sizes, since this was to be a check-list rather than a full-dress bibliography.

It must be remembered that the whole project had to be carried out in my leisure time; for this reason it took much longer than I had anticipated. My usual routine was to take a history of some particular subject and, with Garrison's Introduction, Osler's Bibliotheca, and other aids at my elbow, to go through it with the slips, making appropriate annotations and additional slips where necessary, and putting aside for further consideration items in Garrison's list which did not appear to qualify for inclusion.

Just as I was getting my teeth into the job, war came and threatened to put an end to it. I was at the time in a reserved occupation but had to spend several evenings each week as an air-raid warden. For a time, life continued peacefully enough but our nights were soon disturbed. We sometimes slept for several nights at a time with all our clothes on, and it was common practice for our neighbours to come in for the evening for mutual support.

All this was not conducive to work on Garrison-Morton, but soon the position changed. St. Thomas's was severely damaged and it was decided to move the school and part of the hospital out to Surrey. The school moved to Guildford, about 30 miles south of London. Living accommodation was at a premium but after a few weeks of discomfort I managed to rent a small flat over a ladies' dress shop in the High Street. This had three tiny rooms, so small that with our household furniture in it there was hardly room to move. The material for the bibliography, which by now was growing,

stood on the dining-room table, to be moved underneath when we ate.

This was really a blessing in disguise, for during the long winter evenings there was nothing to do but work on the bibliography. That part of the library which we had been able to evacuate, and which included the Index-Catalogue, was housed in a shop only fifty yards away.

There was always the danger, though now a greatly diminished one, that a bomb might put an end to the whole project, so I began as soon as possible to type out completed items in duplicate and to store one copy in another place. This meant that the list was being built up in a rather haphazard fashion.

As the work proceeded, I began to find that Garrison had left some gaps among both subjects and individual items, and that a number of errors had crept in, possibly during printing. I noted too, and I say this with all respect, that he sometimes showed a not unnatural bias towards the work of his fellow-countrymen and was not always accurate in assigning priority. But this determination of priority is, as everyone knows, one of the greatest difficulties in compiling any work of this kind. Comparatively few discoveries are clear-cut and someone can usually produce an earlier description by some "forgotten pioneer." Again, after a disease entity has been properly described and accepted it is not difficult for the enthusiastic historian to read into an earlier writing a description of that particular condition. I had also realized by now how essential it was that the work must be expanded into a comprehensive bibliography of all important contributions to medical science if it was to be of lasting value.

Fortunately at this time I was asked to visit the Hospital in London each Saturday to look after the literary needs of the doctors remaining on duty there. In practice this took up very little time and I was able to spend most of the day in the library of the Royal Society of Medicine, which remained open until late in the evening. Much of its stock was still there, in the basement stacks, and I was able to begin checking references as well as spend time in consulting works. Each Saturday I took home a history of a special subject or a volume of the Annals of Medical History. I liked the Clio Medica series because they had just the right amount of reading to last a week.

Another change at this time (1941) was the removal of the Medical School from Guildford to the temporary St. Thomas's Hospital at Godalming, 7 miles away. I was able to transfer my duplicate manuscript here, which was more convenient for me. Besides this, I was able to bring out more books from London, although I was still cramped in style by

the fact that so much literature was not available. Holidays during these years were out of the question, so any visits to libraries in London had to be made during my Saturday journey there. I mention this only to show that the shortcomings of the first edition were not entirely due to ignorance or incompetence, but in some measure to the inaccessibility of so many old books and journals. I suppose it was selfish of me to persist in the bibliography at such a time, but by now it had become an obsession, besides providing an escape from the realities of the time.

I mentioned it to several of the hospital staff, who seemed excited at the idea and gave up some of their valuable time to discuss specialties and to advise on recent work worthy of inclusion.

About this time I had the good fortune to meet Isidor Fischer, who you will remember was responsible for the supplement to Hirsch's Biographisches Lexikon der hervorragenden Aerzte and who published works on the history of gynaecology. Fischer gave me a copy of his Eigennamen in der Krankheitsterminologie, a comprehensive bibliography of medical eponyms, and I worked solidly through this.

Correspondence with friends in America was now giving some help and people like Dr. Henry R. Viets sent interesting and valuable information on individual items.

As the work progressed, I became more and more absorbed in it. I had decided not to fix a date for completion but to go on revising, adding and checking until pressure from the publishers became too great. I had also realized that while I might seek the advice of experts in as many subjects as possible, I must not accept that advice without question and careful checking. Specialists can lose a sense of proportion when discussing the milestones in their own subject. My own opinion is – and I hope you will agree with me – that a medical librarian and bibliographer is probably best qualified to undertake a work of this nature because he occupies a position midway between the medical man (who may be blinded by his own knowledge) and the layman. I was also convinced that this type of work could not satisfactorily be carried out by a team. This is not to suggest that I considered myself the most competent person for it!

As the bibliography neared completion, the task of reference checking at original sources grew more formidable and I had to enlist some outside help. Latterly most of my time in London was devoted to this part of the job, but by now many libraries were closed or dispersed. Some slips were sent to various libraries in the provinces and some, I must confess, could not be checked first-hand at all. Incidentally, I used the duplicate slip of the final typescript for

the purpose of checking. By 1942 much of the older historical material in the Royal Society of Medicine had been moved to a house in St. Albans, 20 miles north of London. My friend, Mr. Bishop, who was sub-librarian of the Society at the time, had recently suffered the loss of his home by bombing and lived with his family and the books in this house, coming to London to work each day. He was kind enough to let me visit them to check references. I recall several excursions from Guildford to St. Albans, some 50 miles distant, which began at 7 a. m. and ended at midnight.

Although the house at St. Albans was quite large, books were in almost every room. The bedroom of Mr. Bishop's daughter, who was at this time 12 or 13 years old, was completely lined with sets of gynaecological and obstetrical journals, which no doubt helped her education enormously and was perhaps responsible for the fact that she is now a physician!

By the end of 1942, I had collected a considerable amount of material and began to look forward to the end of the work. At the beginning of 1943 I assembled all the material and prepared the final revision preparatory to sending the whole to the publisher. The slips and their duplicates were numbered and one copy was sent to the publishers.

I now had to prepare the indexes but this could be done before the galley proofs were ready. To make the author index, the duplicate slips were sorted alphabetically by author, additional slips were made for joint authors, and the complete list of authors was typed. Next I went through each slip writing on it in alphabetical order all the subject entries needed. The slips were re-sorted and the subject index typed. Where a slip had more than one entry it was re-sorted after each entry had been typed.

In September 1943 the book at last appeared. Considering the difficulties of the time, I had reason to be grateful to the publishers for their insistence on carrying out their part of the bargain and for the reasonably good standard of production. I put away the manuscript determined not to look at it again for years.

I learned a great deal during the preparation of the bibliography, having begun it with no previous experience of such work.

You will want to know what criteria I used to determine whether an item was worthy of inclusion. The ancient giants of medicine, like Hippocrates and Galen, Celsus and Aretaeus, were of course sure of a place. These, the principal architects of medicine, were not difficult to select. I endeavoured to include the first published edition of their works, and a good modern edition, if one were available. The best

position for them was among the collected works section, except for their contributions on specific subjects or diseases.

The most important contributions to each subject were shown by examination of a general history of medicine and were confirmed by a history confined to that specific subject, which latter helped to fill in the section concerned in greater detail. Coming to more modern times, I had to examine review articles and such publications as the Recent Advances series. A good modern representative work usually epitomizes the knowledge of the subject. Books in this class include Kinnier Wilson's Neurology and Homer Smith on the Kidney. Anyone who had contributed an important advance or who had fitted into position a small but vital piece of the puzzle qualified for inclusion. Those whose names were attached to conditions, techniques, or apparatus usually deserved a place, and for that reason all important eponymous terms were carefully examined. The eponym usually indicates that they were first or prominent in the field, although this is not always the case. As far as possible the first traceable description of a disease was found and included. Some early accounts of diseases, although not first, were so well written, with such complete detail and accurate description, that they deserved a place. Some surgical and other failures were included as being pioneer work which led to later successful operative procedures.

Nobel prize winners were considered and their principal work leading to the award was included.

Drugs were sometimes difficult. The new drug with sensational results may later show serious side-effects or result in the development of resistant organisms, and is discarded. For this reason some drugs included in the present edition may be omitted from the next.

Textbooks by great teachers, such as Osler's Principles, and modern pioneer works, like Needham's Chemical Embryology, were worthy of a place, and an annotation in such cases was sometimes superfluous.

I had to exercise care in assessing items suggested by others. A person who has made a special study of a specific subject over a number of years is apt to attach importance to some contributions out of proportion to their real significance. I had to attempt to view these in their proper perspective, although I am conscious that I did not always succeed in this, and that some sections are overweighted while others are inadequately covered.

Despite its minor inaccuracies, Garrison's Introduction is in my view still the best of the shorter histories of medicine available and it is a matter for great regret that we can no longer look forward to Dr. Fulton's revision. Unfortunately

for me, Ralph Major's two-volume work was not in being at that time. Some of the works which I found particularly valuable and reliable were Charles Singer's writings on anatomy and biology, and of course Osler's Evolution of Modern Medicine. The Clio Medica series gave useful help, and I gained much material from the many volumes of the Annals of Medical History and the Bulletin of the History of Medicine. Wherever such were available, I worked through at least one history of each special subject included in the bibliography.

Some, for example Zilboorg and Henry's Medical Psychology, Rolleston's Endocrine Organs, Needham's Embryology, and Bulloch's Bacteriology, are model histories. I have already mentioned Fischer's useful Eigennamen. My German is not very good and I found works in this language rather slow going, so I probably missed a great deal from not consulting many of them. Osler's Bibliotheca was an invaluable source, with its scholarly annotations and personal notes, and I owe a debt also to the great old biographers like William Munk and Victor Plarr. The excursions into medical history by Sir Humphry Rolleston and Sir D'Arcy Power are first class; Emerson C. Kelly's volumes of Medical Classics were very useful to me and it is unfortunate that so few were published. A good deal of information about the communicable diseases came from textbooks rather than history books. Textbooks on bacteriology usually include reference to the first report of an organism and to other landmarks in the history of the disease or diseases to which it gives rise.

Although some of the most scholarly works on special subjects have been written by British authors, a larger volume of contributions has, I think, come from America, where interest in medical history seems to me to be greater. You have sustained journals on the subject for a number of years, sometimes with the support of private individuals. Our journal Medical History began only in 1957. You have also been prominent in reproducing classical contributions to medicine, sometimes in translation, making them more easily available. You have many knowledgeable collectors of rare books on various aspects of medicine. During my visit here I have been surprised and gratified at the way in which my Bibliography has been exploited and the projects that have arisen from it. For example, Mr. Lee Ash has almost completed an index of the serials quoted, which will have further possibilities, and the National Library of Medicine is using the author index as a basic list for collecting portraits of medical men.

Some of the best writings I met were those of "professional" medical historians like Henry Sigerist, Max Neuburger, and Karl Sudhoff. The senior medical man who turns to

the writing of medical history does not always do so with outstanding success, although there are notable exceptions like Rolleston, Fulton, Guthrie, and Allbutt. A successful combination has sometimes been found between the medical man and the medical librarian, as for example Willius and Keys, Bailey and Bishop.

Choulant's Handbuch der Bucherkunde and his Bibliotheca were of great use; Withington's History, a well-balanced account, was consulted, as well as J. H. Baas's Outlines of the History of Medicine. For the second edition I was able to refer to Kelly's Encyclopedia of Medical Sources to fill some of my gaps. Above all else, of course, I had Garrison's list as a starting point; without it the task would have taken much longer. Anything of Garrison's was worth examination, for he brought to each task the training of the librarian combined with the knowledge of the physician and a love of medical history.

I hope you will not think me immodest if I say that to the preparation of a bibliography of this nature one must bring a considerable capacity for taking pains; nothing must be taken for granted without verification; one must have patience with the tedious parts of the work in order to enjoy the interesting aspects. One must be prepared to visit a library to consult just a single item, sometimes only to find it borrowed or for some other reason not available.

An interesting reflection is the means used to communicate new discoveries. At first it had to be through the medium of books, and generally continued so for some time after journals were established. But as the tempo of discovery quickened, more and more appeared in journals and today virtually no vital work makes its first appearance in a book. The great majority of classical papers in journals appeared in important journals, comparatively few in obscure journals, and very few indeed in such obscurity that they were for a time overlooked — I can think only of Jánsky's work on blood groups and Mendel's paper on heredity. In this connexion Lee Ash's analysis of the serials should prove most interesting and revealing.

The most important thing I learned was the truth of Starling's words: "Every discovery, however important and apparently epoch-making, is but the natural and inevitable outcome of a vast mass of work, involving many failures, by a host of different observers."

I tried to take nothing for granted but to check everything at source, although this was not possible in all cases. I found that Garrison had covered some subjects well, others inadequately. I found excellent histories on some subjects, only poor ones available on others, and some subjects not covered

at all. (Between the first and second editions of the bibliography some of these gaps were filled, I am glad to say.)

I had to remember that some recent work, regarded as extremely important, might soon be shown as of dubious permanent value. In fact it was unsafe to come too close to the present in a work of this nature. Two great difficulties were purely physical ones — the checking of some of the references, owing to the dispersal of libraries from London, and the scarcity in British libraries of sets of several of the early American journals.

By 1949 the first edition of Garrison-Morton was exhausted, having had a kinder reception than I expected or it deserved. In the meantime, it had made me some enthusiastic pen friends, in America and elsewhere, who were sending corrections and suggestions. So in 1950 I began the preparation of a second edition, this time with a greater realization of what was in front of me.

Some good histories had been published since 1943. The Wellcome Historical Medical Library was available again, and its librarian, Noel Poynter, gave me invaluable help. I was able to check many more items at source. Gertrude Annan helped by verifying some early American references. I took the opportunity to amplify sections where necessary, and considerably enlarged the section on histories of medicine. I corrected a number of errors that had come to light, although strangely enough no one has ever drawn my attention to the mistake which I carelessly allowed to appear in the title of what is perhaps the most important book included in the bibliography.

As to the future, my publisher warned me only a month ago that I ought to be considering a third edition. Besides corrections and suggestions from friends, I shall this time have the invaluable Current Work in the History of Medicine as a help. This publication will be a starting point to recent books and articles, some of which have revealed new historical facts. Valuable material has come from such friends as Mr. Kilgour and Helen Bayne.

I have an interleaved copy of the book in which I keep notes, but I do not spend time on piecemeal revision, as I feel that each section must be re-examined as a whole. I think that a new edition should not come until at least ten years after the old, for by that time sufficient material should have accumulated to make it worth while. Librarians and others would not feel justified in buying a new edition if it was not a material improvement on the old. As I mentioned earlier, I have been pleasantly surprised during my visit at the interest shown in the Bibliography. It has convinced me that I must start in earnest on the next revision as soon as I get

home. A new edition will take some time to prepare, for I have a full-time job to maintain, but in the making of it I shall welcome any suggestions, criticism, or help that can make the book more useful.

I should like to mention the help and encouragement I received, including that from many persons on this side of the Atlantic. The Royal Society of Medicine was an important source of nourishment, and several other libraries were most useful. The writers consulted are too numerous to mention here, apart from those to whom I have already referred. Most helpful of all was my wife who bore with patience my long absences in London during the difficult years of the war, who gave many hours to the tedious work of indexing and other routine matters, and who suffered without complaint a husband who talked little and then only about "the book."

Finally I should like to recall to you the oration given by Sir Humphry Rolleston at the centennial celebration of the Army Medical Library in Washington in 1936. During the course of this he said: "Like many other lovers of literature, whole-time librarians usually lead secluded lives outside the ambit of the limelight. The ideal librarian is a saintly, self-denying character with a keen interest not only in books but in their would-be readers, whose time he saves, thereby helping them, rather than himself, into print and prominence."

You can believe this if you wish, although in my own experience I have, by trying to help others, helped myself into a little unwanted prominence, especially in booksellers' catalogues. I need hardly remind this audience that the entry which one so often sees nowadays, "rare - not in Garrison-Morton," can be very misleading. As you all know, the mere rarity of a book is no claim whatever for its inclusion in the Bibliography. I am told that the selling-price of an old medical book is increased by about 30 per cent if it is included in Garrison-Morton. It was my intention to provide a reference book for librarians, not one which would be used for commercial purposes. Nevertheless, in spite of the rising cost of historic medical books one must acknowledge the fact that it has often been the antiquarian bookseller who has preserved the literature, pointed out its importance, encouraged the collector, and helped the librarian.

Rolleston concluded his oration by saying: "The number of medical men who have been whole-time librarians of medical libraries is small; but in the United States what may have been lacking in quantity has been more than made good by quality. To three great bibliographer-librarians of the Army Medical Library tribute is most justly due - Billings, Fletcher, and Garrison; for like the history of the world, that of this great library is the biography of its great men."

While we are all indebted to these three for the Index-Catalogue, I personally am especially grateful to Garrison. He conceived a number of ideas, some of which have been developed, while others deserve to be. I appreciate most of all his pioneer work on the check-list, for without it I would not have had the privilege and pleasure of speaking to you to-day.

NOTES ABOUT THE INDEX

Form. The Index is arranged alphabetically by serial title. Titles are abbreviated in Garrison-Morton, for the most part, but are given here in full as they appear in various authoritative guides such as the Union List of Serials and Leslie Morton's World List of Medical Periodicals. After each serial title, individual issues containing medical classics are listed chronologically, with date, volume number, and pagination as given in Garrison-Morton (unless an error has been discovered, in which case the correct information is given), and, finally, the author and Garrison-Morton number are noted.

Following the usual practice, the umlaut has been replaced by the letter "e" in German names and so alphabetized (e.g. u, ue). K. and k.k., when used as abbreviations, are ignored in the alphabetical arrangement of titles, whether they appear at the beginning of the name of a serial title or internally as a part of the name. R., an abbreviation for "Royal," in whatever language, is ignored in the alphabetization of most titles when used as an initial letter or internally, if abbreviated; however, following the custom of the Union List of Serials, some titles are filed under the word (again, in whatever language), and users are cautioned to look carefully for variations.

Inclusiveness. All serial publications cited in Garrison-Morton (2nd edition, 1954) have been listed. Not only do the main references appear, but when Mr. Morton has indicated earlier or later related papers, translations, abstracts, facsimiles, or reprintings, in serial form, these references have also been included, since all of these clearly relate to the historic quality or values of the principal citation.

Cross-references. The purpose of most of the see and see also references is to guide the user to earlier, later, or alternative titles of serials. The reason for including these entries is that frequently issues of a journal published under one name are bound with issues bearing another name, and the latter has often determined the binder's title on the back-strip of the volume. When this is so, one may be unaware of the different title included and therefore unaware of treasures bound in mistitled volumes. It is hoped that the cross-references will help the reader to avoid overlooking these items.

Inevitably, there were some typographical and other errors in the second edition of Garrison-Morton, and some of these may have been repeated in the Index, though I have carefully checked the original data on all clearly questionable entries. Anyone who reads Leslie Morton's essay in this volume, on the diligent one-man job he did to compile the Bibliography, will be surprised that the book is as wonderfully accurate and complete as it is. Mr. Morton has invited readers to draw errors to his attention so that they are not repeated in future editions of the work; similarly, I will be grateful if readers will take the trouble to inform me of errors found in this Index.

L. A.

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 1884, 18, 25. (Schiff 3819)
 1884, 18, 35-48. (Minkowski 3947)
 1890, 26, 371-87. (Mering & Minkowski 3950)
 1892, 29, 303-19. (Koranyi 4226 Dresser)
 1899, 42, 149-237. (Magnus-Levy 3953)
 1901, 45, 389-434. (Magnus-Levy 3954)
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 1908, 59, 83-94. (Loewi 3644)
 1916, 79, 19-29. (Straub 1904)
 1917, 81, 55-129. (Trendelenburg 1034)
 1926, 112, 261-342. (Cloetta 1912)
 1928, 135, 253-8. (Windaus 1916)
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 1871, 2, 218-35. (Gusserow 3122)
 1882, 19, 177-209. (Kehrer 6241)
 1882, 19, 370. (Saenger 6242)
 1885, 25, 182-252. (Neugebauer 6264)
 1893, 44, 89-148. (Saenger 6094)
 1895, 48, 393-421. (Mackenrodt 1226)
 1896, 50, 287-321. (Krukenberg 6101)
 1900, 61, 627-68. (Wertheim 6114)
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- 1862, 2, 205-87. (Langenbeck 5748)
- 1863, 4, 304-11. (Eulenburg 4332)
- 1872, 13, 65-9. (Billroth 3465)
- 1874, 17, 343-56. (Gussenbauer 3282)
- 1875, 18, 411-23. (Gussenbauer 4174)
- 1883, 29, 1-97. (Woelfler 3832)
- 1883, 29, 254-337. (Kocher 3827)
- 1884, 30, 824-34. (Grawitz 4220)
- 1885, 31, 494-525. (Trendelenburg 6091)
- 1887, 34, 281-6. (Fraenkel 3296)
- 1887, 34, 626-34. (Mikulicz-Radecki 3297)
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- 1890, 40, 429-76. (Bassini 3598)
- 1891, 42, 545-9. (Sprengel 4427)
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- 1892, 44, 117-34. (Schimmelbusch 5775)
- 1894, 47, 1-25. (Bassini 3602)
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- 1903, 69, 28-47. (Mikulicz-Radecki 3527)
- 1903, 71, 955-1000. (Perthes 2004)
- 1908, 86, 686-700. (Trendelenburg 3012)
- 1912, 97, 219-48. (Hashimoto 3845)
- 1924, 133, 312-59. (Kirschner 3016)
- 1931, 167, 586-8. (Sauerbruch 2990)
- 1933, 177, 32-4. (Holtz 4838)

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- 1895, 3, 156-64. (Kirstein 3335)
- 1903, 13, 28-88. (Killian 3314)
- 1904, 16, 362-87. (Killian 3315)
- 1912, 26, 277-317. (Killian 3338)

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- 1824, 2, 79-92. (Schuette 3730)

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- 1865, 1, 309-35. (Schweigger-Seidel 1224)
- 1869, 5, 164-6. (Klebs 549)
- 1870, 6, 229-32. (His 268)
- 1876, 12, 353-8. (Kupffer 552)
- 1876, 12, 364-90. (Fischer 551)
- 1877, 13, 263-77. (Ehrlich 2487)
- 1877, 13, 693-717. (Flemming 498)
- 1896, 47, 261-308. (Sobotta 1179)
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1867, 3, 1-21. (Wreden 3380)
1873, n. F. 1, 157-87. (Schwartz & Eysell 3382)
1877, 13, 26-68. (Bezold 3386)
1904, 62, 255-70. (Gradenigo 3398)
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1809, 9, 136-46. (Reil 1387)
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1847, 6, 690-721, 769-804. (Schiff 931)
1848, 7, 64-73. (Fehling 680)
1848, 7, 359-402, 530-60. (Donders & Jansen 2979)
1850, 9, 625-62. (Schiff 933)
1852, 11, 26-46. (Vierordt 867)
1852, 11, 773-826. (Budge 1507)
1854, 13, 284-7. (Vierordt 772)
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1854, 13, 528-74. (Griesinger 5355)

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1868-69, 1, 387-419. (Sander 4937)
1870, 2, 693-723. (Gudden 1406)

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- 1871-2, 3, 138-61. (Westphal 4844)
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 1875, 5, 792-802. (Erb 4780)
 1875, 5, 803-34. (Westphal 4781)
 1876, 6, 702-18. (Thomsen 4744)
 1877, 7, 393-495. (Forel 1411)
 1879, 9, 172-3. (Erb 4746)
 1883, 14, 87-134. (Westphal 4702)
 1885, 16, 698-710. (Pelizaeus 4703)
 1885, 16, 858-9. (Westphal 1418)
 1886, 17, 217-38. (Struempell 4704)
 1887, 18, 846-71. (Westphal 1418)
 1890, 21, 636-40. (Pick 1420)
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- 1909, 13, 120-2. (Chagas 5283)
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 1883, 6, 79-85. (Marie 3830)
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- 1897, 3, 213-350, 499-601. (Ermengem 2510)

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- 1868, 1, 161-78. (Charcot 4337)
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- 1869, 2, 211-20, 422-38, 496-503. (Brown-Séquard 4813)
- 1869, 2, 744-60. (Charcot & Joffroy 4740)
- 1870, 3, 153-60. (Brown-Séquard 4813)
- 1874, 2 sér., 1, 32-52. (Malassez 876)
- 1874, 2 sér., 1, 126-57. (Hayem 3623)
- 1875, 2 sér., 2, 341-51. (Gayet 4641)
- 1878, 2 sér., 5, 692-734. (Hayem 879)
- 1884, 3 sér., 3, 287-316. (Arnozan & Vaillard 3946)
- 1889, 5 sér., 1, 556-69. (Potain 2798)
- 1889, 5 sér., 1, 651-8, 739-46. (Brown-Séquard 1177)
- 1890, 5 sér., 2, 201-8, 443-57, 641-8. (Brown-Séquard 1177)
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- 1893, 5 sér., 5, 720-28. (Abelous & Langlois 1142)

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1916, 9, 237-60. (Lutembacher 2846)

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- 1823, 3, 350-67. (Rayer 3881)
- 1824, 4, 60-6. (Beclard 3434)
- 1824, 5, 246-50. (Louyer-Villermay 3561)
- 1825, 7, 516-38. (Roux 5741)
- 1825, 8, 25-45. (Bouillaud 4618)
- 1827, 15, 64-91, 225-47. (Bouillaud 1395)
- 1831, 26, 190-205. (Dance 4828)
- 1831, 27, 425. (Brodie 2902)
- 1838, 3 sér., 3, 165-94. (Jacquemier 6174)
- 1843, 4 sér., 1, 1-16. (Fauvel 2754)
- 1844, 4 sér., 4, 334-9. (Bricheteau 2755)
- 1844, 4 sér., 4, 397-426. (Bernard 1264)
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- 1848, 4 sér., 18, 303-19. (Bernard 995)
- 1850, 4 sér., 24, 4-35, 172-214. (Aran 4733)
- 1852, 4 sér., 28, 129-50. (Lasègue 4931)
- 1856, 5 sér., 7, 143-9. (Brown-Séquard 4813)
- 1858, 5 sér., 12, 641-52. (Duchenne de Boulogne 4774)

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- 1859, 5 sér., 13, 36-62, 158-81, 417-51. (Duchenne de Boulogne 4774)
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- 1861, 5 sér., 17, 417-43, 588-605. (Duroziez 2762)
- 1868, 6 sér., 11, 5-25, 179-209, 305-21, 421-43, 552-88. (Duchenne de Boulogne 4739)
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- 1887, 8, 317-22. (Oddi 1018)
- 1890, 13, 123-86. (Mosso 636)
- 1892, 17, 456-71. (Golgi 5243)
- 1895, 23, 177-97. (Mosso 2801)
- 1896, 25, 459-64. (Vassale & Generali 3857)
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- 1922, 5, 570-8. (Kahn 2412)
- 1928, 18, 1-25. (Bonomo 4012)
- 1930, 22, 430. (Gruenpeck 2362)
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- 1908, 1, 349-84. (Marine & Williams 3844)
- 1910, 5, 361-70. (Ricketts & Wilder 5380)
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- 1912, 9, 484-98. (Billings 2570)
- 1915, 16, 547-76. (Keith 903)
- 1918, 22, 8-27. (Smith 852)
- 1920, 26, 244-57. (Pardee 2852)
- 1923, 32, 31-49. (Underhill 2252)
- 1924, 33, 701-37. (Libman & Sacks 2855)
- 1928, 42, 338-51. (Christian 4152)
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- 1933, 51, 866-77. (Blumgart 2899)
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- 1896, 13, 918-22. (Koplik 5444)
- 1903, 20, 355-7. (Beardsley 3426)

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